Case 2:23-bk-17004-BR Doc 11 Filed 11/08/23 Entered 11/08/23 22:03:34 Desc Main Document Page 1 of 6

Attorney or Party Name, Address, Phone & Fax Nos., State Bar No. & Email	FOR COURT USE ONLY
Benjamin Heston Bar Number: 297798 Nexus Bankruptcy 100 Bayview Circle #100 Newport Beach, CA 92660 Phone: (951) 290-2827 Email: ben@nexusbk.com	
Deblor(s) appearing without an attorney Attorney for Debtor(s)	
Francis de Provincia de Article d	ankruptcy Court nia - Los Angeles Division
In re: Kein Duenas	CASE NO.: CHAPTER: 7
	DECLARATION BY DEBTOR(S) AS TO WHETHER INCOME WAS RECEIVED FROM AN EMPLOYER WITHIN 60 DAYS OF THE PETITION DATE
	[11 U.S.C. § 521(a)(1)(B)(iv)]
Debtor(s).	[No hearing required]
Debtor(s) provides the following declaration(s) as to whether income was receive (Petition Date), as required by 11 U.S.C. § 521(a)(1)(B)(iv): Declaration of Debtor 1 1. I am Debtor 1 in this case, and I declare under penalty of perjury that the During the 60-day period before the Petition Date (Check only ONE but I was paid by an employer. Attached are copies of all statements employment income I received from my employer during this 60-d number or bank account is on a pay stub or other proof of income number(s) before filing this declaration.)	e following information is true and correct: ox below): of earnings, pay stubs, or other proof of ay period. (If the Debtor's social security, the Debtor must cross out (redact) the
I was not paid by an employer because I was either self-employed	d only, or not employed.
Date: 11/8/2023 Kein Duenas Printed name of Deblor 1	Signature of Debtor 1
Declaration of Debtor 2 (Joint Debtor) (if applicable) 2. I am Debtor 2 in this case, and I declare under penalty of perjury that if During the 60-day period before the Petition Date (Check only ONE) I was paid by an employer. Attached are copies of all statements employment income I received from my employer during this 60-d number or bank account is on a pay stub or other proof of income number(s) before filing this declaration.) I was not paid by an employer because I was either self-employer.	ne following information is true and correct: nox below): of earnings, pay stubs, or other proof of lay period. (If the Debtor's social security the Debtor must cross out (reduct) the
Date:Printed name of Debtor 2	Signature of Debtor 2

Case 2:23-bk-17004-BR Doc 11 Filed 11/08/23 Entered 11/08/23 22:03:34 Desc Main Document Page 2 of 6



Keiri Duenas	4658 W Imperial HWY APT	1 Inglewood CA 90304

Name	Company	Employee ID	Pay Period Begin	Pay Period End	Check Date	Check Number
Keiri Duenas	Chevron Stations Inc.	106985	09/11/2023	09/17/2023	09/22/2023	

	Hours Worked	Gross Pay	Pre Tax Deductions	Employee Taxes	Post Tax Deductions	Net Pay
Current	31.93	566.82	0.00	88.56	0.00	478.26
YTD	31.93	566.82	0.00	88.56	0.00	478.26

		Earning	gs					Employee Taxes	
Description	Dates	Hours	Rate	Amount	YTD Hours	YTD Amount	Description	Amoun	YTD
Hourly Pay	09/11/2023 - 09/17/2023	31.93333	17.75	566.82	31.933334	566.82	OASDI	35.14	35.14
							Medicare	8.22	8.22
							Federal Withholding	31.83	31.83
							State Tax - CA	8.27	8.27
							CA SDI - CASDI	5.10	5.10
Earnings				566.82		566.82	Employee Taxes	88.56	88.56

Taxable Wages		
Description	Amount	YTD
OASDI - Taxable Wages	566.82	566.82
Medicare - Taxable Wages	566.82	566.82
Federal Withholding - Taxable Wages	566.82	566.82
State Tax Taxable Wages - CA	566.82	566.82

	Federal	State		Absence Balance		
Marital Status	Single or Married filing			Accrued	Reduced	Available
	separately	or more incomes)	Covid Leave	40	0	40
Allowances	0	0	Sick	1.0644	0	1.0644
Additional Withholding	0	0	Sick Time Annual Usage Limit	48	0	48
			Vacation	0.6291	0	0.6291

Payment Information										
Bank	Account Name	Account Number	USD Amount	Amount						
Bank of America	Bank of America *****6170	*****6170		478.26 USD						



Keiri Duenas	4658 W Imperial HWY APT 1 Inglewood CA 90304	

Name	Company	Employee ID	Pay Period Begin	Pay Period End	Check Date	Check Number
Keiri Duenas	Chevron Stations Inc.	106985	09/18/2023	09/24/2023	09/29/2023	
		N 165	182.05 AND			-

	Hours Worked	Gross Pay	Pre Tax Deductions	Employee Taxes	Post Tax Deductions	Net Pay
Current	29.95	531.62	0.00	80.42	0.00	451.20
YTD	61.88	1,098.44	0.00	168.98	0.00	929.46

		Earning	s				Emplo	yee Taxes	
Description	Dates	Hours	Rate	Amount	YTD Hours	YTD Amount	Description	Amount	YTD
Hourly Pay	09/18/2023 - 09/24/2023	29.95	17.75	531.62	61.883334	1,098.44	OASDI	32.96	68.10
1. The same of the						(4)400-0010-04-0010	Medicare	7.71	15.93
							Federal Withholding	27.60	59.43
							State Tax - CA	7.36	15.63
							CA SDI - CASDI	4.79	9.89
Earnings				531.62		1,098.44	Employee Taxes	80.42	168.98

Taxable Wages							
Description	Amount	YTD					
OASDI - Taxable Wages	531.62	1,098.44					
Medicare - Taxable Wages	531.62	1,098.44					
Federal Withholding - Taxable Wages	531.62	1,098.44					
State Tax Taxable Wages - CA	531.62	1,098.44					

	Federal	State		Absence Balance		
Marital Status	Single or Married filing			Accrued	Reduced	Available
	separately	or more incomes)	Covid Leave	0	0	40
Allowances	0	0	Sick	0.9983	0	2.0627
Additional Withholding	0	0	Sick Time Annual Usage Limit	0	0	48
-			Vacation	0.59	0	1.2191

Payment Information									
Bank	Account Name	Account Number	USD Amount	Amount					
Bank of America	Bank of America ******6170	*****6170	10.000 10.000 10.000	451.20 USD					



Keiri Duenas	4658 W Imperial HWV APT 1 Inglewood CA 90304	

Name	Company	E	mployee ID	Pay Perio	d Begin	Pay Peri	od End	Check Date	Check Number
Keiri Duenas	Chevron Stations Inc.		106985	09/2	25/2023	10/0	1/2023	10/06/2023	
	Hours Worked	Gross Pay	Pre Tax De	eductions	Emplo	yee Taxes	Post Tax	Deductions	Net Pay
Current	38.02	675.28		0.00		115.62		0.00	559.66
YTD	99.90	1,773.72		0.00	·	284.60		0.00	1,489.12

		Earning	ıs				Emplo	yee Taxes	
Description	Dates	Hours	Rate	Amount	YTD Hours	YTD Amount	Description	Amount	YTD
Hourly Pay	09/25/2023 - 10/01/2023	38.01666	17.75	674.80	99.900001	1,773.24	OASDI	41.87	109.97
Shift Differential	09/25/2023 - 10/01/2023	0.383334	1.25	0.48	0.383334	0.48	Medicare	9.79	25.72
						20100000	Federal Withholding	44.84	104.27
							State Tax - CA	13.05	28.68
ī						5.	CA SDI - CASDI	6.07	15.96
Earnings				675.28		1,773.72	Employee Taxes	115.62	284.60

Taxable Wages		
Description	Amount	YTD
OASDI - Taxable Wages	675.28	1,773.72
Medicare - Taxable Wages	675.28	1,773.72
Federal Withholding - Taxable Wages	675.28	1,773.72
State Tax Taxable Wages - CA	675.28	1,773.72

	Federal	State		Absence Balance		
Marital Status	Single or Married filing			Accrued	Reduced	Available
	separately	or more incomes)	Covid Leave	0	0	40
Allowances	0		Sick	1.2672	0	3.3299
Additional Withholding	0	0	Sick Time Annual Usage Limit	0	0	48
			Vacation	0.7489	0	1.968

Payment Information									
Bank	Account Name	Account Number	USD Amount	Amount					
Bank of America	Bank of America *****6170	*****6170	33333 - 413 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	559.66 USD					



Keiri Duenas 4658 W Imperial HWY APT 1 Inc	alewood, CA 90304
--	-------------------

IName	Company	E	mpioyee IUI	Pay Per	100 Begin	Pay Peri	oa Ena	Check I	Date	Check Number
Keiri Duenas	Chevron Stations Inc.		106985	10	0/02/2023	10/0	8/2023	10/13/2	2023	
	Hours Worked	Gross Pay	Pre Tax D	eductions	Emp	loyee Taxes	Post 7	Tax Deductions		Net Pay
Current	39.85	708.98		0.00		124.04		0.00		584.94

		Facilities Territor				
YTD	139.75	2,482.70	0.00	408.64	0.00	2,074.06
Current	39.85	708.98	0.00	124.04	0.00	584.94
	Hours worked	Gross Pay	Pre Tax Deductions	Employee Taxes	Post Tax Deductions	Net Pay

	Earning	gs				Emplo	yee Taxes	
Dates	Hours	Rate	Amount	YTD Hours	YTD Amount	Description	Amount	YTD
10/02/2023 - 10/08/2023	39.66666	17.75	704.09	139.566667	2,477.33	OASDI	43.96	153.93
10/02/2023 - 10/08/2023	0.183333	26.625	4.89	0.183333	4.89	Medicare	10.28	36.00
		0		0.383334	0.48	Federal Withholding	48.89	153.16
					10.000,1000	State Tax - CA	14.53	43.21
					55	CA SDI - CASDI	6.38	22.34
			708.98		2,482.70	Employee Taxes	124.04	408.64
	10/02/2023 - 10/08/2023	Dates Hours 10/02/2023 - 10/08/2023 39.66666	10/02/2023 - 10/08/2023 39.66666 17.75	Dates Hours Rate Amount 10/02/2023 - 10/08/2023 39.66666 17.75 704.09 10/02/2023 - 10/08/2023 0.183333 26.625 4.89	Dates Hours Rate Amount YTD Hours 10/02/2023 - 10/08/2023 39.66666 17.75 704.09 139.566667 10/02/2023 - 10/08/2023 0.183333 26.625 4.89 0.183333 0 0.383334	Dates Hours Rate Amount YTD Hours YTD Amount 10/02/2023 - 10/08/2023 39.66666 17.75 704.09 139.566667 2,477.33 10/02/2023 - 10/08/2023 0.183333 26.625 4.89 0.183333 4.89 0 0.383334 0.48	Dates Hours Rate Amount YTD Hours YTD Amount Description 10/02/2023 - 10/08/2023 39.66666 17.75 704.09 139.566667 2,477.33 OASDI 10/02/2023 - 10/08/2023 0.183333 26.625 4.89 0.183333 4.89 0 0.383334 0.48 Federal Withholding State Tax - CA CA SDI - CASDI	Dates Hours Rate Amount YTD Hours YTD Amount Description Amount 10/02/2023 - 10/08/2023 39.66666 17.75 704.09 139.566667 2,477.33 OASDI 43.96 10/02/2023 - 10/08/2023 0.183333 26.625 4.89 0.183333 4.89 Medicare 10.28 Federal Withholding State Tax - CA (A SDI - CASDI 48.89 State Tax - CA (CA SDI - CASDI 6.38

Taxable Wages						
Description	Amount	YTD				
OASDI - Taxable Wages	708.98	2,482.70				
Medicare - Taxable Wages	708.98	2,482.70				
Federal Withholding - Taxable Wages	708.98	2,482.70				
State Tax Taxable Wages - CA	708.98	2,482.70				

	Federal	State		Absence Balance		
Marital Status	Single or Married filing			Accrued	Reduced	Available
	separately	or more incomes)	Covid Leave	0	0	40
Allowances	0		Sick	1.3283	0	4.6582
Additional Withholding	0	0	Sick Time Annual Usage Limit	0	0	48
			Vacation	0.785	0	2.753

Payment Information							
Bank	Account Name	Account Number	USD Amount	Amount			
Bank of America	Bank of America *****6170	*****6170		584 94 USD			



Keiri Duenas	4658 W Imperial HWY APT 1 Inglewood, C	A 90304

Name	Company	E	Employee ID	Pay Per	riod Begin	Pay Peri	od End	Check [ate	Check Number
Keiri Duenas	Chevron Stations Inc.		106985	10	0/09/2023	10/1	5/2023	10/20/2	023	
	Hours Worked	Gross Pay	Pre Tax D	eductions	Emplo	yee Taxes	Post T	ax Deductions		Net Pay
Current	38.45	686.04		0.00		118.31		0.00		567.73
YTD	178.20	3 168 74		0.00		526 95		0.00		2 641 79

		Earnin	gs			į,	Emplo	yee Taxes	
Description	Dates	Hours	Rate	Amount	YTD Hours	YTD Amount	Description	Amount	YTD
Hourly Pay	10/09/2023 - 10/15/2023	38.04999	17.75	675.39	177.616666	3,152.72	OASDI	42.53	196.46
Overtime	10/09/2023 - 10/15/2023	0.4	26.625	10.65	0.583333	15.54	Medicare	9.95	45.95
Shift Differential			0		0.383334	0.48	Federal Withholding	46.13	199.29
ALCO DESCRIPTION OF STREET, ST						MOSKENS N	State Tax - CA	13.52	56.73
						5.	CA SDI - CASDI	6.18	28.52
Earnings				686.04		3,168.74	Employee Taxes	118.31	526.95

Taxable Wages							
Description	Amount	YTD					
OASDI - Taxable Wages	686.04	3,168.74					
Medicare - Taxable Wages	686.04	3,168.74					
Federal Withholding - Taxable Wages	686.04	3,168.74					
State Tax Taxable Wages - CA	686.04	3,168.74					

	Federal	State	te Absence Balance				
Marital Status	Single or Married filing			Accrued	Reduced	Available	
	separately	or more incomes)	Covid Leave	0	0	40	
Allowances	0	0	Sick	1.2817	0	5.9399	
Additional Withholding	0	0	Sick Time Annual Usage Limit	0	0	48	
==			Vacation	0.7575	0	3.5105	

Payment Information							
Bank	Account Name	Account Number	USD Amount	Amount			
Bank of America	Bank of America ******6170	*****6170		567.73 USD			